MAY 1 4 2008

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the aperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control

MADELANDE S			numo	<u>jer</u>	
Effective on 12/08/2004 Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known			
		Application Number	09/828,865		
FEE TRAN	ISMILIAL	Filing Date	April 10, 2001		
FOR FY 2008		First Named Inventor	CORL, Mark T.		
FURF	1 2006	Examiner Name	D.D. Saltarelli		
☐ Applicant claims small entity	status. See 37 CFR 1.27	Art Unit	2623		
TOTAL AMOUNT OF PAYMENT	(\$)810.00	Attorney Docket No.	8736.134.00		
·					

METHOD OF PAYMENT	check all that ap	ply)				· .		
■ Check ☐ Cred	it Card	Noney Order	☐ None	☐ Other (please	identify):			
☐ Deposit Account	■ Deposit A	ccount Number 5	<u>0-0911</u> [Deposit Accour	nt Name:			
For the above-identifie	ed deposit acco	ount, the Director	is hereby aut	horized to: (chec	k all that apply	y)		
☐ Charge fee(s) indica	ated below			Charge fee(s) indi	cated below, exc	ept for the fili	ng fee	
■Charge any addition	al fee(s) or under	payments of fee(s)		Credit any overpayn	nents			
under 37 CFR 1.16								
WARNING: Information on information and authorization	this form may be	ecome public. Cre	edit card inform	nation should not	be included on	this form. Pro	ovide cred	it card
FEE CALCULATION	on on P10-2036.		•					***
								
1. BASIC FILING, SEAR	CH, AND EXA FILING		SEARCH	FEES	EXAMINA	TION FEES		
		Small Entity	بغر	Small Entity		Small Entity		Fees Paid (\$)
Application Type	<u>Fee (\$)</u>	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)		rees Paid (\$)
Utility	310	155	510	255	210	105		·
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES Fee Description							Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Each independent claim of Multiple dependent claims	ver 3 or, for Re	h claim over 20 a eissues, each ind	and more than ependent cla	n in the original pa im more than in tl	atent he original pate	ent	50 200 360	25 100 180
	Extra Claims	Fee (\$)	Fee Pa	nid (\$)	Multi	ple Depende	nt Claim	<u>s</u>
- 20 or HP =	·	x	=		<u>Fe</u>	e (\$)	Fee Pai	d (\$)
HP = highest number of total	claims paid for, if Extra Claims		Fee Pa	aid (\$)				
		x						
HP = highest number of indep	pendent claims pa	aid for, if greater tha	an 3		•			
3. APPLICATION SIZE F	EE				:- eoéo (e1)	35 for email o	ntitul for a	anch additional
If the specification and dra 50 sheets or fraction	awings exceed thereof See 3	100 sheets of pa 35 U.S.C. 41 (a)(per, the appli 1)(G) and 37	cation size fee di CFR 1.16(s).	Je is \$250 (\$12	25 for small e	nuly) for e	each additional
Total Sheets E	xtra Sheets	Number of eac	h additional 50	or fraction thereo) _	Fee Paid	(\$)
- 100 =	/ 50	=	_ (round up to a	a whole number)	x	=	Fee Pai	 d (\$)
4. OTHER FEE(S) Other: Re	quest for Conti	nued Examinatio	n (RCE)				\$810.0	
Othor:			_					

SUBMITTED BY	1			
Signature	7	Your chol	Registration No. (Attorney/Agent)	Telephone
Name (Print/Type)	Song K. Jung	Rg N. 43,324	35,210	Date: May 14, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.